

Ratent and Trademark Office
Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORN	EY DOCKET NO /TITLE

08/942,402

**Customer Service Center** 

10/01/97

JOHNSON:

MNFRAME.005A

0232/0126

KNOBBE MARTENS OLSON & BEAR 620 NEWPORT CENTER DRIVE 16TH FLOOR NEWPORT BEACH CA 92660

NOT ASSIGNED

DATE MAILED: 2763

01/26/98

## NOTICE TO FILE MISSING PARTS OF APPLICATION

Filing Date Granted
An Application Number and Filing Date have been assigned to this application. However, the items indicated below are missing. The required items and fees identified below must be timely submitted ALONG WITH THE PAYMENT OF A SURCHARGE for items 1 and 3-6 only of \$
If all required items on this form are filed within the period set above the total amount owed by applicant as a
Alarge entity.
2: Additional claim fees of \$, including any multiple dependent claim fees, are required.  Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.
☐ 3. The oath or declaration: ☐ is missing. ☐ does not cover the newly submitted items. ☐ does not identify the application to which it applies. ☐ does not include the city and state or foreign country of applicant's residence.  An oath or declaration in compliance with 37 CFR 1. 63, including residence information and identifying the application by the above Application Number and Filing Date is required.
4. The signature(s) to the oath or declaration is/are:
□ by a person other than inventor or person qualified under 37 CFR 1.42, 1.43, or 1.47.  A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.  □ 5. The signature of the following joint inventor(s) is missing from the oath or declaration:
An oath or declaration listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.
☐ 6. A \$ processing fee is required since your check was returned without payment (37 CFR 1.21(m)).
7. Your filing receipt was mailed in error because your check was returned without payment.
☐ 8. The application does not comply with the Sequence Rules:  See attached Notice to Comply with Sequence Rules: 37 CFR 1.821-1.825.*
☐ 9: OTHER
Direct the response and any questions about this notice to "Attention: Box Missing Parts."
A copy of this notice <u>MUST</u> be returned with the response.